

FROM :HEALTHY BODY BALL
07/01/2003 13:22

520-881-9448

FAX NO. :520-579-7515

DURANDO BIRDWELL & JANKS

Jul. 01 2003 10:49PM P2

PTO/SB/81 (05-03)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Cheryl E. Zemont
Title	Healthy Body Ball
Art Unit	
Examiner Name	
Attorney Docket Number	0502.003

I hereby appoint:



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Name	Registration Number
Antonio R. Durando	28,409
Gavin J. Milczarek-Desai	45,801

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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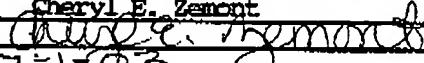
<input type="checkbox"/> Firm or Individual Name	Gavin J. Milczarek-Desai			
Address	Durando Birdwell & Janks, P.L.C.			
Address	2929 E. Broadway Blvd.			
City	Tucson	State	AZ	Zip 85716
Country	US			
Telephone	520-881-9442	Fax	520-881-9448	

I am the:

Applicant/inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Cheryl E. Zemont		
Signature			
Date	7-1-03	Telephone	520-881-9442

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input type="checkbox"/> Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-6199 and select option 2.

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FAX NO. :520-579-7515 Jul. 01 2003 10:49PM P3
5208814448 JURAHNU DURKINELL

PTO/SB/01 (10-01)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	0502.008
First Named Inventor	Cheryl E. Zemont
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Healthy Body Ball

(Title of the Invention)

the specification of which

Is attached hereto

OR

was filed on (MM/DD/YYYY) [redacted]

as United States Application Number or PCT International

Application Number [redacted]

and was amended on (MM/DD/YYYY) [redacted]

(If applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(c) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
[redacted]	[redacted]	[redacted]	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

[Page 1 of 2]

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07/01/2003 13:22

5208819448

FAX NO. :520-579-7515

DURANDO BIRDWELL & J

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PAGE 01

PTO/SB/01 (10-01)

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DECLARATION — Utility or Design Patent Application

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Gavin J. Milczarek-Desai

Name

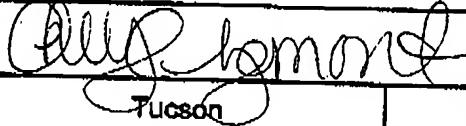
Durando Birdwell & Janke, P.L.C.
2929 E. Broadway Blvd.

City	AZ	85716
US	520-881-9442	520-881-9448
Country	Telephone	Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Cheryl E.	Family Name or Surname	Zemont
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Inventor's Signature		Date	7-1-03
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Residence: City	AZ	US	US
Tucson	State	Country	Citizenship

Mailing Address

Tucson	AZ	85752	US
City	State	ZIP	Country

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
-------------------------------------------	---------------------------

Inventor's Signature	Date
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Residence: City	State	Country	Citizenship
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Mailing Address

City	State	ZIP	Country
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Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.